Revision: HCFA-PM-95-4 (HSQB)

JUNE 1995

Attachment 4.35-A

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: Nebraska

ELIGIBILITY CONDITIONS AND REQUIREMENTS

Enforcement of Compliance for Nursing Facilities

The State uses other factors described below to determine the seriousness of deficiencies in addition to those described at \$488.404(b)(1):

NOT APPLICABLE

TN No. MS-95-15 vpersedes No. MS-90-11

Approval Date: 00T 2 3 1995

Effective DatedUL 0 1 1995